

FILED

OCT 22 2008

ROXBOROUGH  
SECRETARY OF STATE

# STATEMENT OF ORGANIZATION

## POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)

☐

Party Committee

☒

Political Action Committee

This is an (check one)

☐

Initial Statement

☒

Amended Statement

### COMMITTEE

(PLEASE TYPE OR PRINT)

Name

Mailing Address (Street, City, State, Zip Code)

Business Telephone

### CHAIRPERSON

Name

Home Telephone

Mailing Address (Street, City, State, Zip Code)

Business Telephone

### TREASURER

Name

Home Telephone

Mailing Address (Street, City, State, Zip Code)

Business Telephone

### AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Mailing Address (Street, City, State, Zip Code)

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

Health care and women's reproductive  
and equal rights,

### SIGNATURE:

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

20 Oct 2008

(Date)

(Signature of Chairperson)

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**Campaign Finance  
Statement of Organization  
For Political Action Committees  
And Party Committees**

Governmental Ethics Commission  
109 W. 9th, Suite 504  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[www.kansas.gov/ethics](http://www.kansas.gov/ethics)

This is a (Check one) ☐ Party Committee ☒ PAC

This is an (Check one) ☒ Initial Appointment ☐ Amended Statement

**Committee**

Name: **Prokando**  
Address: **555 N Woodlawn Ste 215**  
City: **Wichita** State: **KS** Zip: **67208**  
Business Phone:  
Email Address: **ahamel@prokando.org**

**Chairperson**

Name: **Julie Burkhart**  
Address: **555 N Woodlawn Ste 215**  
City: **Wichita** State: **KS** Zip: **67208**  
Home Telephone: Business Phone:  
Email Address: **jburkhart@prokando.org**

**Treasurer**

Name: **Lyndsay Stauble**  
Address: **555 N Woodlawn Ste 215**  
City: **Wichita** State: **KS** Zip: **67208**  
Home Telephone: Business Phone:  
Email Address: **ahamel@prokando.org**

**Affiliated or Connected  
Organizations**

Name:  
Address:  
City: State: Zip:  
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

**I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.**

Executed on:

Date: **7/28/2008 9:32:18 AM** Signature of Chairperson: **Julie Burkhart**

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## STATEMENT OF ORGANIZATION

## FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

## COMMITTEE

(PLEASE TYPE OR PRINT)

Name

ProKanDo - a pro-woman political organization

Mailing Address (Street, City, State, Zip Code)

P.O. Box 8249, Wichita, KS 67208

Business Telephone

(316) 691, 2002

## CHAIRPERSON

Name

Julie Burkhardt

Home Telephone

( )

Mailing Address (Street, City, State, Zip Code)

P.O. Box 8249, Wichita, KS 67208

Business Telephone

(316) 691, 2002

## TREASURER

Name

Lyndsay Stauble

Home Telephone

( )

Mailing Address (Street, City, State, Zip Code)

P.O. Box 8249, Wichita, KS 67208

Business Telephone

(316) 691, 2002

## AFFILIATED OR CONNECTED ORGANIZATIONS

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Health care and women's reproductive and equal rights.

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10 Jan, 2008

(Date)

(Signature of Chairperson)

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JAN 10 2008

Governmental Ethics Commission  
110 WEST 9TH STREET  
TOPEKA, KANSAS 66612



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NOV 03 2006

## STATEMENT OF ORGANIZATION

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NOV 02 2006

FOR POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES  
SECRETARY OF STATEGovernmental Ethics Commission  
TOPEKA, KANSAS 66612

(See Reverse Side For Instructions)

This is a (check one)	<input type="checkbox"/> Party Committee	<input checked="" type="checkbox"/> Political Action Committee
This is an (check one)	<input type="checkbox"/> Initial Statement	<input checked="" type="checkbox"/> Amended Statement

## COMMITTEE

(PLEASE TYPE OR PRINT)

Name

PROKANDO

Mailing Address (Street, City, State, Zip Code)

555 N. WOODLAWN SUITE 215  
WICHITA, KS 67208

Business Telephone

(316) 691-2002

## CHAIRPERSON

Name

JULIE BURKHART

Home Telephone

( )

Mailing Address (Street, City, State, Zip Code)

555 N. WOODLAWN SUITE 215  
WICHITA, KS 67208

Business Telephone

(316) 691-2002

## TREASURER

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( )

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555 N. WOODLAWN SUITE 215  
WICHITA, KS 67208

Business Telephone

(316) 691-2002

## AFFILIATED OR CONNECTED ORGANIZATIONS

Name

Mailing Address (Street, City, State, Zip Code)

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.

TO SUPPORT CANDIDATES

## SIGNATURE:

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

31 Oct 2006  
(Date)

(Signature of Chairperson)